

## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective December 8, 2004

10/535541

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
11.0	NATIONAL	STACE FEES	(Column	11)	<del>(</del>	Column 2)	7	RATE		1		1
U.S. NATIONAL STAGE FEES							┨		FEE	ł	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150 Satisfies PCT Article 33(1)-		LARGE ENT. = \$ 300  All other situations =		-	BASIC FEE	150	OR	BASIC FEE	
EXAMINATION FEE			(4) = \$50/\$100 U.S. is ISA = \$50/\$100			100 / \$ 200	-	EXAM. FEE	200		EXAM, FEE	<u> </u>
SEA	RCH FEE		ALL other countries = \$ 200 / \$ 400			her situations = 250 / \$ 500		SEARCH FEE	100		SEARCH FEE	
FEE	FOR EXTRA	SPEC. PGS.	minus 100 =			/ 50 ≐		X \$ 125 =			X \$ 250 =	
тот	AL CHARGEA	BLE CLAIMS	4フ minus 20 =		・ 2フ			X \$ 25 =	1075	OR	X \$ 50 =	
INDI	EPENDENT CL	AIMS	() minus 3 =		* 3			X \$ 100 =	300	OR	X \$ 200 =	
MUL	TIPLE DEPEN	DENT CLAIM PRI	ESENT					+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							-	SMALL E	NTITY	OR	OTHER SMALL E	
NT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AME	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE	·	OR	TOTAL ADDIT. FEE	
	•	(0-1				(0.1						
AMENDMENT B		(Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT		(Colur HIGH NUM PREVIO PAID	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	,	≐		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		or	+ \$ 360 =	
							•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
**	If the "Highest Nu	umn 1 is less than the umber Previously Pai umber Previously Paid mber Previously Paid	d For" IN THIS SP. d For" IN THIS SP.	ACE is less	s than '20 s than '3',	0', enter "20". , enter "3".	d in th	e appropriate box	in column 1.			